

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006895

FILED
May 02, 2005
Secretary of State

Entity Name: CASA VICTORIA HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

2900 GLADES CIRCLE
SUITE 375
WESTON, FL 33327

New Principal Place of Business:

2700 GLADES CIRCLE
SUITE 111
WESTON, FL 33327

Current Mailing Address:

2900 GLADES CIRCLE
SUITE 375
WESTON, FL 33327

New Mailing Address:

2700 GLADES CIRCLE
SUITE 111
WESTON, FL 33327

FEI Number: 20-2765181 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

NATHAN, RANDY J ESQ.
7805 SW 6TH COURT
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D,P () Delete
Name: FERREIRA, EDUARDO
Address: 2900 GLADES CIRCLE SUITE 375
City-St-Zip: WESTON,, FL 33327

Title: D,VP () Delete
Name: MENENDEZ, JOSE M
Address: 2900 GLADES CIRCLE SUITE 375
City-St-Zip: WESTON,, FL 33327

Title: DS T () Delete
Name: GARRIDO, LUIS
Address: 2900 GLADES CIRCLE SUITE 375
City-St-Zip: WESTON,, FL 33327

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D,P (X) Change () Addition
Name: FERREIRA, EDUARDO
Address: 2700 GLADES CIRCLE SUITE 111
City-St-Zip: WESTON,, FL 33327

Title: D,VP (X) Change () Addition
Name: MENENDEZ, JOSE M
Address: 2700 GLADES CIRCLE SUITE 111
City-St-Zip: WESTON,, FL 33327

Title: DS T (X) Change () Addition
Name: GARRIDO, LUIS
Address: 2700 GLADES CIRCLE SUITE 111
City-St-Zip: WESTON,, FL 33327

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GARRIDO LUIS

DS T

05/02/2005

Electronic Signature of Signing Officer or Director

Date